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Poliomyelitis Outbreak -- Albania, 1996

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During April 17-September 16, 1996, an ongoing outbreak of paralytic poliomyelitis in Albania resulted in 66 cases of acute flaccid paralysis (AFP), including seven (11%) deaths. Wild poliovirus type 1 was isolated from seven cases.

The first case-patient, a 12-month-old child, had onset of paralysis on April 17; ages of AFP patients ranged from 4 months to 46 years (median age: 20-24 years). Of the reported AFP cases, 46 (70%) occurred among persons aged 10-30 years, and 13 (20%) occurred among persons aged greater than or equal to 30 years. Seven cases occurred among children aged 0-9 years; five (8%) were among children aged less than 5 years. Cases have been reported from 18 of 37 districts, primarily in the northern and central parts of the country; no cases have been reported from the southernmost districts.

National Immunization Days (NIDs) were successfully completed on April 8 and May 17, during which reported coverage with oral poliovirus vaccine (OPV) was greater than 97% among children aged less than 5 years, the targeted age group. Albania's Ministry of Health is organizing a mass vaccination campaign with OPV for children and adults (aged 0-50 years) to control the outbreak.

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Diseases, National Center for Infectious Diseases; Polio Eradication Activity, National Immunization Program, CDC.

Editorial Note: Preliminary results of the outbreak investigation suggest that factors contributing to this outbreak include 1) problems with the delivery of routine vaccination services before 1993, 2) an increase in contacts with persons from polio-endemic countries since 1991, and 3) sanitation problems resulting from recent large-scale movement of segments of the Albanian population to urban areas. The relatively low incidence among children aged less than 5 years may be a result of the recent NIDs and improvements in the cold chain for routine vaccination services since 1993. The high case-fatality rate may be due to the high proportion of cases among older children and adults -- who are known to be at higher risk for bulbar paralysis -- and may be aggravated by delays in seeking medical care.

Travelers who are inadequately vaccinated against polio or whose past vaccination history is uncertain should contact their physician to discuss polio vaccination options before leaving for Albania. For information concerning vaccinations for international travel, you may call the Communicable Disease Branch at (502) 564-4478.

Update - "Epi" Rapid Response Team 1996

The "Epi Rapid Response Team" was formed in 1987 to assist with the investigation and control of disease outbreaks which periodically occur across the state. Its membership of trained "Responders" now stands at 61 members. New members can be added to the roster through participation in a rigorous training course given by the Division of Epidemiology or by carrying out an epidemiologic investigation under Division supervision. Except for the seven state staff, all the members are employed by local health departments and receive no additional compensation for team duties.

The following "Rapid Responders" are available to provide consultation about communicable diseases and to assist with the investigation and control of disease outbreaks.

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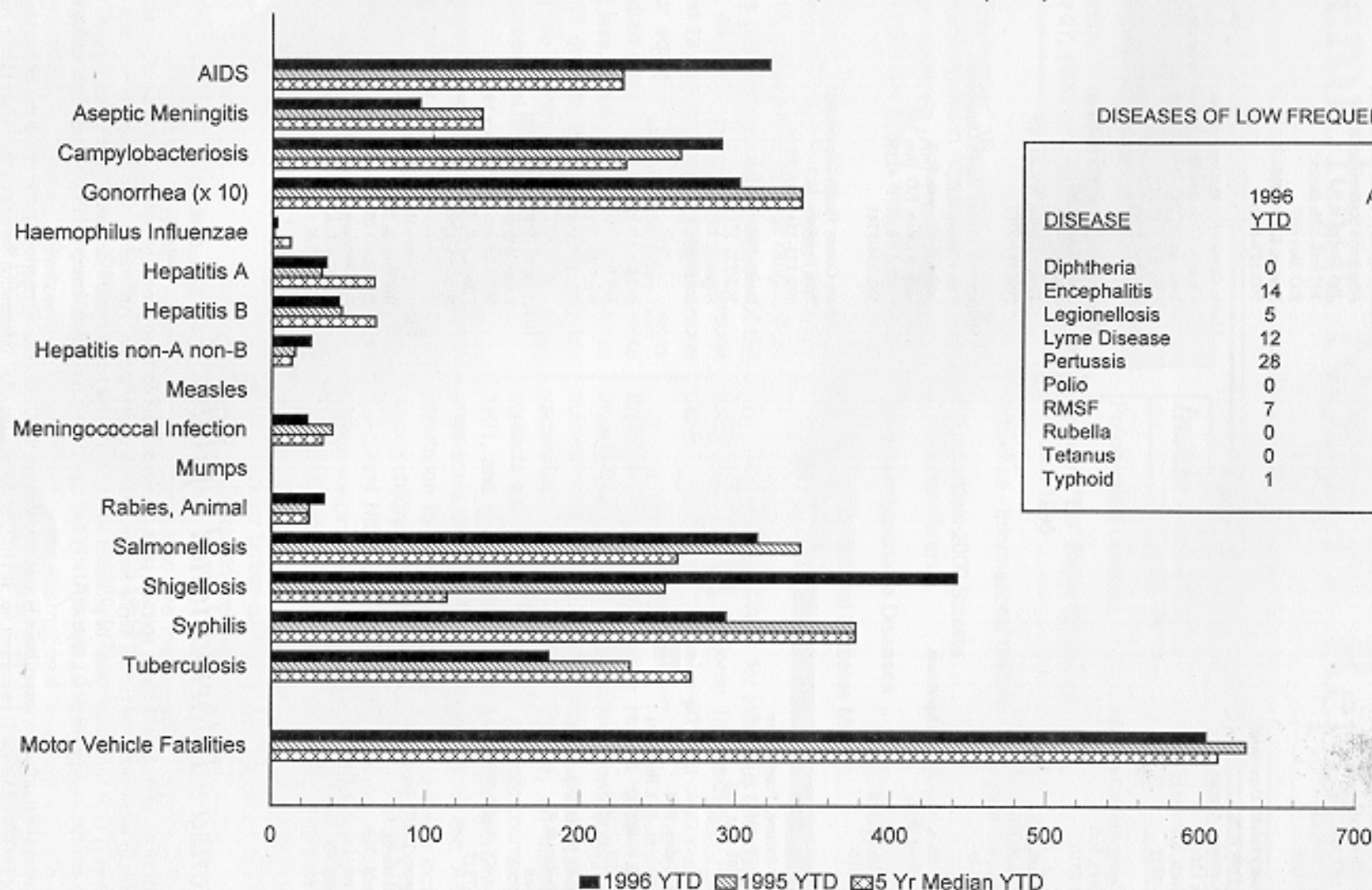
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Influenza - Informational Update . . .

Editorial Note: In the United States, sporadic cases of influenza are common during the summer, but outbreaks of influenza, such as those observed in Washington and Hawaii during June and July, are not common. Although specific patterns of influenza activity and the time and extent of virus circulation cannot be predicted with certainty, the recent worldwide pattern of influenza suggests that all three influenza virus strains — type A(H3N2), type A(H1N1), and type B — will circulate during the 1996-97 influenza season in the United States.

Information about influenza surveillance is available through the CDC Voice Information System (influenza update) by telephone (404-332-4555) or fax (404-332-4565) (document no. 361100) or through the CDC Information Service on the Public Health Network electronic bulletin board. From October through May, the information is updated weekly. Periodic updates about influenza are published in MMWR and information about local influenza activity is available through the Department for Public Health at 502/564-3261.

CASES OF SELECTED REPORTABLE DISEASES IN KENTUCKY, YEAR TO DATE (YTD) THROUGH SEPTEMBER 1996



Disease numbers reflect only those cases which meet the surveillance definition.

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November is National Diabetes Month

Diabetes is a serious, disabling and costly disease. Nationally, there has been a fivefold increase in the number of individuals diagnosed with diabetes since 1958. In Kentucky, nearly 250,000 people are estimated to have diabetes - half of whom are undiagnosed. In addition, the non-diabetic population at increased risk for developing diabetes is estimated to be 900,000 - nearly 35% of all adult Kentuckians. About one in every seven health care dollars in the U.S. are spent on persons with diabetes. The good news is that many of the costly diabetes-related complications can be prevented or significantly delayed if preventive approaches are widely and effectively applied.

Diabetes affects not only individuals, but families and communities. The Department for Public Health supports a statewide approach for prevention of diabetes and its complications. This effort includes eighteen strategically located Adult Health Teams consisting of a registered nurse and a registered dietitian who have been specially trained in diabetes. Team responsibilities include: community assessment activities, education to health department personnel and other local health professionals regarding diabetes management, group education classes for patients and families with diabetes, and various related preventive/health promotion activities (e.g. smoking cessation, healthy nutrition, exercise, etc.) The Adult Health Teams also have similar responsibilities in relationship to prevention of breast and cervical cancer, and cardiovascular disease. The Department of Public Health also makes provisions for local health departments to offer individual counseling for patients with diabetes including referrals for dilated eye exams.

In addition, the Kentucky Department for Public Health's Diabetes Advisory Committee has developed recommendations for appropriate medical care for Kentuckians with diabetes. These are consistent with the Clinical Practice Recommendations of the American Diabetes Association. This committee has also developed a diabetes flow sheet to assist health care providers in utilizing these guidelines. 2000 physicians in Kentucky will soon receive copies of these items.

The treatment of diabetes requires a team approach. Together, we have the ability to significantly improve the lives of people with diabetes and other chronic diseases in our State. For information about diabetes and other chronic diseases, you may call 502-564-7996.

References available on request.